

Bensley LS, Van Eenwyk J, Spieker SJ, Schoder J (1999). Self-reported abuse history and adolescent problem behaviors. I. Antisocial and Suicidal Behaviors. *Journal of Adolescent Health* 24: 163-172.

Abstract

Purpose: To examine the associations of self-reported abuse and sexual molestation with self-reported antisocial behavior and suicidal ideation/behavior in a general population of adolescents.

Methods: We used a stratified cluster sampling procedure with replacement to sample 4,790 students in Washington State public schools in grades 8, 10 and 12. Students were asked in a self-administered questionnaire whether they had ever been abused by an adult and whether they had ever been sexually molested. They were also asked about antisocial behavior and suicidal ideation and behavior in the past year. We conducted polytomous logistic regressions, controlling for gender and grade, using Software for the Statistical Analysis of Correlated Data (SUDAAN).

Results: Reported abuse history was associated with antisocial behavior and with suicidal ideation and behavior. The associations were stronger for abuse+molestation than for nonsexual abuse or molestation alone, and stronger at higher levels of severity (e.g., suicide attempts versus suicidal thoughts). For example, adjusted odds ratios and 95% confidence intervals (in parentheses) for abuse+molestation were 4.4 (3.1-6.2) for suicidal thoughts, 6.8 (4.4-10.4) for suicide plan, 12.0 (7.9-18.4) for non-injurious suicide attempt, and 47.1 (23.3-95.3) for injurious suicide attempt. For abuse alone these figures were 2.3 (1.7-3.2), 3.1 (2.1-4.6), 5.1 (3.3-7.8) and 11.8 (4.4-31.9) respectively.

Conclusions: Efforts to reduce antisocial behavior and suicidal ideation/behavior in adolescence, particularly early or severe manifestations of the behaviors, should consider the possible role of a history of maltreatment, especially the possibility of sexual abuse.

Bensley LS, Spieker SJ, Van Eenwyk J, Schoder J. (1999). Self Self-Reported Abuse History and Adolescent Problem Behaviors. II. Alcohol and Drug Use. *Journal of Adolescent Health* 24: 173-180.

Abstract

Purpose: We examined the associations of self-reported abuse and sexual molestation with self-reported alcohol and drug use in a general population of adolescents.

Methods: We used a stratified cluster sampling procedure with replacement to sample 4,790 students in Washington State public schools in grades 8, 10 and 12. Students were asked whether they had ever been abused by an adult and whether they had ever been sexually molested. They were also asked about their levels of alcohol and drug use and about early initiation of substance use. We conducted polytomous logistic regressions, controlling for gender and grade, using Software for the Statistical Analysis of Correlated Data (SUDAAN).

Results: We identified associations between reported abuse history and alcohol and drug use in adolescence and early initiation of substance use. The associations between reported abuse history and alcohol use were stronger at younger ages, and the strongest association was between abuse+molestation and relatively severe (heavy) drinking by eighth graders (OR=7.9, 95% CI 2.6-17.4). For drug use, the associations with reported abuse history were slightly stronger at higher levels of severity and for abuse+molestation compared to nonsexual abuse. For early initiation, the associations with abuse history were stronger for abuse+molestation than for nonsexual abuse or molestation alone, and stronger for marijuana use/regular drinking than for alcohol/cigarette experimentation. For example, adjusted odds ratios and 95% confidence intervals (in parentheses) for abuse+molestation were 3.5 (2.8-4.5) for alcohol/cigarette experimentation and 12.2 (6.3-23.6)

for marijuana use/regular drinking by age 10. For abuse alone these figures were 2.5 (2.0-3.1) and 4.7 (3.0-7.3), respectively.

Conclusions: Efforts to reduce substance use and abuse in adolescence, particularly heavy use and use early in adolescence, should consider the possible role of a history of maltreatment.